

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 622467	RECEIPT DATE:	08 / 16 / 00
IA NUMBER:	PCT/ SI99 / 00003	IA FILING DATE:	02 / 05 / 99
FAMILY NAME:	JURJAVCIC	DELAY WAIVED (Y/N):	N
GIVEN NAME:	DAMJAN	DEMAND RECEIVED (Y/N):	Y
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	02 / 17 / 98
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	204 745	COUNTRY:	
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	000000	TELEPHONE 2129499022
			FAX

NAME: ABELMAN FRAYNE SCHWAS

STREET: 150 EAST 42ND STREET

CITY: NEW YORK

STATE/COUNTRY: NY ZIP: 10017

EMAIL:

APPLICATION TITLES:

DEVICE PROVIDING PICTURE VISIBILITY FROM ALL SIDES

TAB TO LAST POSITION,PUSH SEND



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/622,467	<b>FILING DATE</b> 11/03/2000 <b>RULE</b> -	<b>CLASS</b> 040	<b>GROUP ART UNIT</b> 3628	<b>ATTORNEY DOCKET NO.</b> 204.745
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**APPLICANTS**

Damjan Jurjavcic, Idrija, SLOVENIA;

**\*\* CONTINUING DATA \*\*\*\*\***

THIS APPLICATION IS A 371 OF PCT/SI99/00003 02/05/1999

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

SLOVENIA P-9800044 02/17/1998

**IF REQUIRED, FOREIGN FILING LICENSE**  
**GRANTED \*\* 12/11/2000**

**\*\* SMALL ENTITY \*\***

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> SLOVENIA	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 6	<b>INDEPENDENT CLAIMS</b> 2
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature: <u>[Signature]</u> Initials: _____				

**ADDRESS**

Abelman Frayne & Schwab  
150 East 42nd Street  
New York, NY 10017-5612

**TITLE**

Device providing picture visibility from all sides

<b>FILING FEE RECEIVED</b> 905	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
		<input type="checkbox"/> 1.18 Fees ( Issue )
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit